

THE

J. L. Hodson
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PHYSICIAN'S FIRST STEPS

IN

PROFESSIONAL LIFE:

AN ADDRESS,

DELIVERED AT THE MEDICAL COMMENCEMENT IN WASHINGTON,

MARCH 7, 1832.

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Professor of the Theory and Practice of Medicine.

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ADDRESS.

GENTLEMEN GRADUATES:

IT is my duty to give you a valedictory charge. I purpose to lay before you some reflections, which are intimately concerned with your success and reputation as medical practitioners.

The Professors have ascertained by general observation, and by daily examination in all the branches, that you have prosecuted study with perseverance, with zeal, and with success. They have declared in the ceremonies of this day, that the *foundation* is well laid. Of this, you and those who confide to you their safety, may be well assured.

Call *now* to mind, and *in future* bear in mind, that the *foundation* only is laid. The structure is not completed. We have done our work, and on this work you are to erect the superstructure of usefulness and fame. You can do this. It only remains for me briefly to give you the outlines of the plan—to say to you where the materials for your operation are to be collected, and how they are to be joined together.

In the course of your private and public studies, you must have formed some estimate of what awaits you in the duties of your profession. Your responsibilities are of the

highest order, and singularly diversified. The best interests of society in its tenderest relations—the hopes of parents—the dependence of families—the rescue of the innocent—the conviction of the guilty—the relief of the suffering—the offices of charity—the salvation of life—the mitigation of the awful pangs of death! What of moral and intellectual accountability these involve—they are yours. What can support you but the conviction, that in your education, an eye has been steadily fixed on this responsibility.

My object is not to gloom your prospects too fearfully; it is to nerve you to continued intellectual exertion, commensurate with your duties. Fidelity requires this. How are you to practice medicine with success, to act with skill and decision in emergency? How are you to render your profession “other than a melancholy attendance on misery, a mean submission to peevishness, a continual interruption to pleasure,” or than the blind groping of empirical routinism? How trace the mutable forms of disease—the diversified morbid effects of deranged organic process, as they occur in different persons from the same cause, or in the same person from different causes? How, but by commencing a course with system, pursuing it with energy, directing it with tact, and elevating it, not more by intellectual, than by moral dignity?

You are first and soon to learn what is the difference between dependence in elementary courses of study, on the wisdom of teachers, and engaging in all the difficult and embarrassing details of practical life, dependent on your own resources. To avail you, these resources must be improved by reading good books, in habitual study; by

minutely observing the phenomena of disease; by accurately recording these symptoms, with the effects of remedies, whether your cases are successfully treated or not.

He who neglects critical observation of morbid action, jeopardises the lives of his patients, and loses to all diagnostic and therapeutic purpose, the value of practice. He who makes it from his outset, gets his mind into an admirable train to ascertain all important phenomena; and to notice variations of disease from season, locality, idiosyncrasy, &c.; especially to distinguish the progress of disease from the irritation of medicines—a point frequently important and embarrassing. Superficial observation has led “many a trivial wound to a fatal tetanus; a slightly irritable stomach to gastritis; an unimportant tenderness in the abdomen to peritonitis; a trifling hoarseness to croup; a giddy head to apoplexy.” It constitutes you a careless practitioner—the least respectable, the least useful, and the most dangerous member of society.

You cannot record the occurrences of practice without this critical notice; and to give it full effect, a diary must be kept from the first. You will delight to add to this day of small things. Number and variety of cases and observations will soon give it importance. Note daily what occurs, and volumes are gathered without labour; utility attained with pleasing pursuit; the habit is formed insensibly; while your diary, like those of Locke and Rush, is one of the most useful works in your library.

This daily record commends itself highly in that it gives you the habit of composing with facility; thus of communicating to others the fruits of your experience. A talent for composition, displayed judiciously, may lead you

to distinguished stations in the profession. And if you draw largely on the works of others, you should contribute liberally for what you so freely receive. I have often regretted, when conversing and consulting with physicians of forty years' practice, that their long experience was entirely lost, because they kept no diary.

Chiefly, a retrospect of recorded experience enables you to form fixed medical principles. What a lesson the fate of medical theories should teach the student! What volumes of speculation have been confuted or forgotten! Yet speculate you must and will. Is it not too much the boast of modern medicine, that it is based on inductive philosophy? It is a severe operation, especially for the young, to reduce the prurient genius to the limits of fact and rigid observation. Positions are taken, to which observation bends.—The only corrective is, to record your cases with unbiassed fidelity, to let each speak for itself—it will point to correct inferences. I have no doubt you will adopt one of two courses; either to be satisfied with some one theory: that sympathy, gastro-enteritis, or humorism, some one of them is the pathological bed which all diseases must fit—or you reason thus; on all these subjects wise men have differed widely; there must be some truth in each. I will view them by the light of experience. I will be prepared to allow the pretensions of each, as various cases in their phenomena yield to them; and thus, by rendering to Darwin, Boerhaave, and Broussais, the things that are theirs, I will do justice to them, to my own judgment, and to my responsibilities. In this independent, eclectic course, we have endeavoured to train your minds. I have often been tempted to adopt what is termed a theory of disease, par-

ticularly since the duties of a professorship devolved upon me. A desire to be useful strengthened the temptation, and personal fame urged me to become a systematic. But for the sake of my pupils, I rejoice in standing as yet unpledged, and in laying before you the whole ground of medical principles. I am proud of the unpretending, yet independent character of an eclectic. In steering your bark along the stream of medical instruction, it was my duty to warn you of the whirlpools of false hypothesis, to guide you in the course charted by the ablest and most practical men. Now, Gentlemen, I give you the helm, and pray God to grant you a prosperous voyage.

It completes the value of your records, if they preserve accurate descriptions of the anatomy of disease. If the facilities for this essential source of instruction are limited, recollect that it is in a great measure owing to the apathy, or indiscretion of physicians themselves. It is proper that popular feeling should be keen and vigilant; but if approached with delicacy, tenderness, and judgment, it is frequently overcome. Nothing can extenuate a want of the most circumspect discretion here. One false, rude step, not only hurls destruction on its author, and properly too; but it throws an impediment in the way of the wise and discreet, which nothing for a long time can remove. Always place your motives explicitly before the friends.—State the importance of the duty—its loathsomeness—its attendant danger. Tell them how many die from wounds in dissection;—clearly announce the good likely to result to survivors; make it plain, that *it is the interest of society, and not that of the physician*, to promote post mortem examination, and you have reason to expect, that what has

been judiciously attempted, will happily succeed. Dr. Watt directed the dissection of two of his children, for the benefit of the remaining members of his family. It is curious to observe the different sense that prevails in different states of society on this subject. While with us every feeling is in array against it, you find, as in the Islands of the Pacific Ocean, that when a person dies, the nearest relatives or friends dissect off all the soft parts with great care, burn them, and preserve the bones in their places of worship. When two savages brought on board the English ship "several pounds of the flesh of Capt. Cook," it was supposed by the British officers that it had been rescued from cannibalism; but subsequent events ascertained, that the body had been undergoing the process, which was usually consummated by the deification of the bones.

This morbid anatomy, is the only avenue to the formation of a rational "theory of disease," or pathology. Compare the reasoner about a spasm, or a lentor, or a vitiated humour, or a morbid excitement, with the necrotomist, who searches with his knife for lesion—and this is the difference, that the reasoner goes into scholastic dogmas to expound disease; while the morbid anatomist looks into the body, goes to the very organ, or to the very spot or part of the viscus, to see where and what is the disease. Where can you find, or where can you expect to find a more palpable or important distinction? This morbid anatomist is the philosopher who starts from what the knife displays, into the region of hypothesis; while the reasoner knows more of the schools than of strict philosophy—and this he will find to be the case when he comes to display a spasm, or a lentor, or morbid excitement, with his knife.

In exercising the discreet zeal necessary to prosecute necrotomy, you can conduct dissection so as to retain a knowledge of minute practical anatomy, and thereby do SURGERY. It is familiarity with structure that inspires the operator with the *fortiter in re*. Those who practise in the Southern States, are without excuse, if they are not surgeons. Competency to perform surgical operations, is rarely without employment; though surgeons in large cities have hospitals to extend their experience, any population not unusually sparse, will contribute materials for surgical repute. Now, Gentlemen, it is as much your duty to be good surgeons, as to treat disease skilfully. If with this sense of obligation you recollect that adequate skill is easily acquired; if withal you look to personal motives, how near and easy the path is to surgical fame, and how brilliant that fame is, I do not see why you should not all be useful and successful surgeons.

Every consideration urges you to preserve an accurate knowledge of the fascinating science of CHEMISTRY. The recent investigations into proximate medicinal principles have given great importance to medical Chemistry. A small laboratory, while it is ornamental to your office, costs little money. One-third of the time spent in unprofitable and dangerous amusements, enables you to instruct private pupils in Chemistry; to inspire them with a correct method of acquiring knowledge, by imparting a taste for this experimental inductive method. In this way too you prepare yourselves to fill the highest stations in medicine, I mean professorships in colleges. An unusual interest has gathered round the chair of Chemistry; it has been the first seat in the schools, occupied by men whose

very names are rallying points for the votaries of laudable ambition. CULLEN was professor of this branch in Glasgow, and afterwards in Edinburg, before he filled other stations. RUSH entered our schools as professor of Chemistry. WISTAR was first professor of Chemistry and Physiology, then of Anatomy and Surgery—finally of Anatomy. BOERHAAVE occupied the chair of Chemistry at Leyden zealously, and improved very much the apparatus.—Cullen's views of Chemistry, are finely disclosed by Dr. Robinson, the editor of Black's Lectures. How indiscriminate was that besom of tyranny which swept Lavoisier from a science, the improvement of which, gave life principal value in his estimation. Compare the legitimate warrior, the generous Marcellus, who sought but to save Archimedes, with the bloody exterminator who filled the measure of his country's *infamy*, by murdering, not the enemy, but the citizen, the philosopher, Lavoisier. If Cicero sought the tomb of Archimedes, science weeps over the grave of Lavoisier.

MATERIA MEDICA, and practical medicine are intimately connected. For the purposes of daily prescription, you must have an accurate knowledge of pharmacy. These relations of Materia Medica and practical medicine, derive a charm from the works of Cullen, Barton, and Murray. Of late you have the diffusive elegance of Chapman, and the didactic precision of Paris, to invite taste, and direct judgment. Medical Botany goes hand in hand with Materia Medica. Dr. Rush, who delighted to inspire enthusiasm in the acquisition of medical science, encouraged the devotion of students to Botany, by occasionally appearing at Barton's spring lectures. The last time I saw the

venerable Rush, the Sydenham of America, he was seated in the midst of the class of botanical students.

Gentlemen—I know not where taste can more invitingly lead you, or motive more powerfully urge you; where love of science, duty to God, and practical benevolence combine with greater force, than when the physician stands, as you will soon stand, the days-man between heaven and the afflicted. What adds to your enthusiastic aspiring after the heights of learning, is “that there remaineth much land to be possessed.” Your path is from the known to the unknown. In every branch of medicine there are new worlds to conquer. The medical laggard may lazily lounge on the enervating couch of fancied attainment; but compare him with that vigorous, untiring spirit, whose principle is, that while one *opprobrium artis* remains, his work is unfinished, his victory is incomplete.

It is only the accomplished physician who is suitably qualified to discharge a duty not duly estimated. I mean the instruction of private pupils. I will conclude this address with some brief considerations, the fruits of personal experience and observation.

I know no one duty in which the medical profession, and society at large have a deeper stake, than in the private tuition of medical students. In the moral world, the hope is from the virtue of the rising generation; in medicine the expectations of the science are fixed on students. Duty, interest, and inclination induce physicians to educate young men for the profession; and as the genius and judgment of students are controlled and fostered, so is the perfection of the healing art approached.

If the relations between preceptor and pupil be too loose

in this country, it arises from the inadequate sense of mutual obligation. If the teacher weigh well what he has undertaken; that the tree grows as the sapling is bent; that train up a *student* in the way he should go, and he will not depart therefrom; that he is raising up a blessing, or a scourge to society: if the teacher thus regard the student, his first step is to examine well the moral and intellectual materials he has to mould; then he secures these for a deliberate period; and finally he spares neither devotion, precept nor example; but by all, enforces a moral power that ought to bear on every student. So with the student, if connected with a preceptor by strict and permanent engagements, and if to these be added the respect which the character of a conscientious tutor should command; we say it must end happily with both parties.

Let your first consideration be the *moral* character of the pupil. Apart from abstract principle, and duty to the profession, there are some circumstances which it behooves you to weigh well. The concerns of the physician's office are sacred; they ought not to be placed in the power of an immoral youth; they are not safe in an inconsiderate breast, much less in an immoral one. To admit such, is unjust to respectable young men, and is an obstruction to those who may wish to enter your office. One unmanageable youth destroys the harmony and comfort of all his fellow-students. Again, when you take a youth whose habits you cannot control, it is at the expense of honesty; for you receive a fee without the possibility of making an adequate return.

Next, estimate duly the intellectual fitness of the applicant. Here I shall not enlarge. The pupil should be a good classical scholar; he ought to be a college graduate.

The pleasure, the efficiency, the fruit of your instructions entirely depend on the soil in which they are planted. It should be fertile, it ought to be rich. What think you of the mechanic, who takes an apprentice destitute of the physical ability requisite for his trade? See then to your applicant, that he possess intellectual power adequate to the duty he is about to undertake. Yet there are young men, who know no Latin, and who have never seen a college, with genius, a mental vigour and perseverance, which, especially if combined with moral worth, will ensure them success. You may safely encourage such merit, for it is comparatively rare.

Moral character and a good education, are then the requisites with which to commence.

Another important thing is the length of time for which you engage with a pupil. It were well if *apprenticeships* were as common with us as they are in Europe; if private pupilage were extended to a longer period; if our students were as proud of their apprenticeships as is Sir A. Cooper, and if they wrote and spoke with such veneration of their teachers, as Cooper does of Cline. Dr. Rush was for six years a pupil with Redman; and during the whole time, was but a few days absent from his office. Never receive a pupil for a shorter term than two years, and let the obligations be binding. This obligation renders the progress of the student regular; it prevents instability; the interest of the preceptor is heartily engaged, as he knows he is deliberately to finish his work. The attachment between a virtuous pupil and a faithful instructor, daily increases.—On these subjects I speak from an experience which is a source of laudable pride and of great happiness. There is

but one exception to these suggestions—and that is, where the student has already spent some time in another office.—To what extent this should relax your rules, is easily ascertained, by examining the progress already made by the applicant.

Certain considerations may tempt you to receive pupils. Allow me to suggest some of them. Your calculation may be directly or indirectly lucrative; and if either, is legitimate. You are entitled to full remuneration for educating a youth—this is direct. You are free to make the character of your pupils a source of reputation—this is the indirect gain. But let your motive in taking students be not only pure, but free from suspicion. What can be his motive who crowds his office with unfit students? When a physician renders access to his office too easy, let the student say, "*timeo Danaos et dona ferentes.*" The rush into the medical profession is decidedly to be discouraged.—Most certainly should it be controlled by the qualifications of applicants, rather than by the views, whatever they may be, of physicians. If you seek or acquire reputation from private teaching, let it spring from the character, and not from the number of your students.

I have a few words to say on the subject of your library. You have great personal interest in having a select library. But, Gentlemen, you cannot conscientiously occupy a student's time, or receive his money, without giving him the essential advantages of all good books. To do so is unjust and merciless. Expend your pupilage fees in adding to your library. What a dreary prospect that youth has, who enters an office, where there are few books, those badly selected, and the instructor without an adequate sense

of his responsibility. Would that this case were rare.—No fund pays with such interest as a good library; no economy is so fatal as that, which, at the same time, withholds from the preceptor the means of instruction, and from the pupil the means of improvement. You must commence early, or the taste for books, and the disposition to procure them, will weaken or be lost in other habits or business. As the mechanic without his instruments, as the warrior without his weapons, as the mariner without his compass, so is the physician without his library.

This is not the place to consider your moral course.—You have your Bible, your conscience and your intelligence; follow where they lead. Whatever of difficulty, of collision, of professional discord you may have to contend with, be assured that a firm, manly, unequivocal spirit, will bear you through. Good sense, good feeling, and good manners, will enable you to illustrate the virtues of the medical man.

We have all taken deep interest in preparing you for your duties in life. We follow you with our prayers.

And now, my young friends, you go—but whither? To a life of ease and happiness, where smiles and fortune await you? Your very first professional duty may teach you a far different lesson. The field from which you are to gather fruits, be they bitter or sweet, is the sufferings of your fellow creatures. The gloom of the sick room—the shade cast by the danger and nearness of death over the sick man; the mystery that still overhangs the treatment of many of the most common diseases—the number of opprobria, give a gloomy, even a fearful cast to your destinies. But I do not leave you here, as with a voice from

the tomb. Light is on the right hand and on the left—the lights of learning and humanity. These shed rays of healing and of hope around you—and not rays only—but a brightness which dispels the gloom—renders your path clear—your steps firm—your works blest—blest of man—blest of God.

THE END.